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CONFIRMATION NO. 5638

<b>SERIAL NUMBER</b> 10/782,496	<b>FILING OR 371(c) DATE</b> 02/19/2004 <b>RULE</b>	<b>CLASS</b> 360	<b>GROUP ART UNIT</b> 2627	<b>ATTORNEY DOCKET NO.</b> HT03-020
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

None WK

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

None WK

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

05/14/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 5
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>[Signature]</u> Initials <u>WK</u>				

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## TITLE

ABS through aggressive stitching

<b>FILING FEE RECEIVED</b> 1104	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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